





## UNITED STATES DEPARTMENT OF COMMERCE

Patent and Trademark Office
Address: COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

APPLICATION NUMBER	FILING/RECEIPT DATE	DATE FIRST NAMED APPLICANT ATTORNEY DO		NEY DOCKET NO./TITLE
697164 799	10/01/90 MATT		<b>6</b>	TITM - CCC 1

0242/1023

ĐŪDLEY A CIAMPORÇERO JR ONE JOHNSON & JOHNSON PLAZA NEW BRUNSWICK NJ 08933-7003

NOT ASSIGNED

3721

DATE MAILED:

10/23/98

## NOTICE TO FILE MISSING PARTS OF APPLICATION Filing Date Granted

An Application Number and Filing Date have been assigned to this application. The items indicated below, however, are missing. Applicant is given TWO MONTHS EROM THE DATE OF THIS NOTICE within which to file all required items and pay fees required below to avoid

ahand	onment. Extensions	of time may be obta	ained by filing a petition accompanied by the extension fee under the provision	ns of 37 CFR
1 1360	a) If any of items 1 o	r 3 through 5 are in	idicated as missing, the SURCHARGE set forth in 37 CFR 1.16(e) of \$65.0 \$130.00 for a non-small entity, must also be timely submitted in reply to	00 for a small
	in compliance with . oid abandonment.	3/ CPR 1.2/, 01	\$150.00 for a non-small entity, must also be timely submitted in reply to	uns nonce
if all r	required items on th	nis form are filed v	within the period set above the total amount owed by applicant as a	
	ali entity (statemen		all entity is \$	
□ 1.	The statutory basic missing.	filing fee is:	. (	
	insufficient.	mit O	to complete the basic filing fee and/or file a small entity statemer	nt claiming
	Applicant must subi such status (37 CFI	R 1.27).	•	n claiming
□ 2.	Additional claim fee	s of \$		
	\$	_for	independent claims over 3.	
	\$	_for	dependent claims over 20.	
•	\$	for multiple depen	ndent claim surcharge.	
<b>№</b> з.	Applicant must eith		itional claim fees or cancel additional claims for which fees are due.	المسائر ما الم
X 3.	N ie miesing or un	evecuted	ed itamo	:
5.24	does not identify	the newly submitte y the application to	u neins	7 77 1000
	☐ does not include	e the city and state	or foreign country of applicant's residence.	
			with 37 ČFR 1. 63, including residence information and identitying the appli	ication by
_ 4	• •		<i>ing Date is required.</i> ation is/are by a person other than inventor or person qualified under 37 CF	FR 1 42
<b>□ -7.</b>	1.43 or 1.47.			:
	A properly signed o Application Number		in compliance with 37 CFR 1.63, identifying the application by the above	
□'5	• •	_	entor(s) is missing from the oath or declaration:	
	The signature of the	v*	Anton(o) to missing from the saur or assistance.	
			with 37 CFR 1.63 listing the names of all inventors and signed by the omitto by the above Application Number and Filing Date, is required.	ed 6478
□ <b>6</b> ,	• • • •		nce your check was returned without payment (37 CFR 1.21(m)).	\$
			pecause your check was returned without payment.	ß
□ 8.	The application does	s not comply with the to Comply with Se	he Sequence Hules. equence Rules 37 CFR 1.821-1.825."	100750
	OTHER:	, to comply mill ot		· · · · · · · · · · · · · · · · · · ·
Direct	t the reply and any o	uestions about this	notice to "Attention: Box Missing Parts."	00000168 30.00 CH
				0000
		Acopy of th	is notice <u>MUST</u> be returned with the reply.	
$\Rightarrow$				26/1999 TLW11 FC:105
	omer Service Center	Tivinian (703) 200	1202	5 3
mitijai	Patent Examination			719 119
	*	PART	2 - COPY TO BE RETURNED WITH RESPONSE	श्च स

FORM **PTO-1533** (REV.9-97)